


United States Bankruptcy Court
61288, Houston TX 77208

SOUTHERN DISTRICT OF TEXAS P.O.Box
(Houston Division)

PROOF OF CLAIM

Name of Debtors <u>Stage Stores, Inc., a Delaware corporation</u> <u>Specialty Retailers, Inc., a Texas corporation</u> <u>Specialty Retailers, Inc. (NV), a Nevada corporation</u> *place an "x" beside the name of the Debtor you are filing a claim against		Case Number 00-35078-H2-11 00-35079-H2-11 00-35080-H2-11	Creditor ID#: 788-60673 <div style="text-align: center;"> United States Bankruptcy Court Southern District of Texas FILED JUN 30 2000 Michael N. Milby, Clerk </div>
Name of Creditor (The person or other entity to whom the debtor owes money or property): The Duncan Banner		Check box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars.	
Name and address where notices should be sent: *****AUTO**3-DIGIT 735 The Duncan Banner 1001 W Elm Ave P.O. Box 1268 Duncan OK 73533-4746 		Check box if you have never received any notices from the bankruptcy court in this case Check box if the address differs from the address on the envelope sent to you by the court.	
Account or other number by which creditor identifies debtor: <div style="text-align: center; font-size: 1.2em;">07966</div>		Check here <input type="checkbox"/> replaces if this claim <input type="checkbox"/> amends a previously filed claim, dated: _____	
1. Basis for Claim <input type="checkbox"/> Goods sold <input checked="" type="checkbox"/> Services performed <input type="checkbox"/> Money loaned <input type="checkbox"/> Personal injury/wrongful death <input type="checkbox"/> Taxes <input type="checkbox"/> Other _____		<input type="checkbox"/> Retiree benefits as defined in 11 U.S.C. § 1114(a) <input type="checkbox"/> Wages, salaries, and compensation (Fill out below) Your SS#: _____ Unpaid compensation for services performed from _____ to _____ <div style="text-align: center;">(date) (date)</div>	
2. Date debt was incurred: 4/5 - 5/24 (2000)		3. If court judgment, date obtained:	
4. Total Amount of Claim at Time Case Filed: \$ 2741.56 If all or part of your claim is secured or entitled to priority, also complete Item 5 or 6 below. <input type="checkbox"/> Check this box if claim includes interest or other charges in addition to the principal amount of the claim. Attach itemized statement of all interest or additional charges.			
5. Secured Claim. <input type="checkbox"/> Check this box if your claim is secured by collateral (including a right of setoff). Brief Description of Collateral: <input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other All personal and intangible property of Debtor's Estate Value of Collateral: \$ _____ Amount of arrearage and other charges at time case filed included in secured claim, if any \$ _____		6. Unsecured Priority Claim. <input type="checkbox"/> Check this box if you have an unsecured priority claim Amount entitled to priority \$ _____ Specify the priority of the claim: <input type="checkbox"/> Wages, salaries, or commissions (up to \$4,300)* earned within 90 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier - 11 U.S.C. § 507(a)(3) <input type="checkbox"/> Contributions to an employee benefit plan - 11 U.S.C. § 507(a)(4). <input type="checkbox"/> Up to \$1,950* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use - 11 U.S.C. § 507(a)(6). <input type="checkbox"/> Alimony, maintenance, or support owed to a spouse, former spouse, or child - 11 U.S.C. § 507(a)(7). <input type="checkbox"/> Taxes or penalties owed to governmental units - 11 U.S.C. § 507(a)(8). <input type="checkbox"/> Other - Specify applicable paragraph of 11 U.S.C. § 507(a-____). <small>*Amounts are subject to adjustment on 4/1/98 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.</small>	
7. Credits: The amount of all payments on this claim has been credited and deducted for the purpose of making this proof of claim.		This Space Is for Court Use Only	
8. Supporting Documents: Attach copies of supporting documents, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, court judgments, mortgages, security agreements, and evidence of perfection of lien. DO NOT SEND ORIGINAL DOCUMENTS. If the documents are not available, explain. If the documents are voluminous, attach a summary.		1145	
9. Date-Stamped Copy: To receive an acknowledgment of the filing of your claim, enclose a stamped, self-addressed envelope and copy of this proof of claim.		Date: 4/27/00 Sign and print the name and title, if any, of the creditor or other person authorized to file this claim (attach copy of power of attorney, if any): MIKE THORNBERRY - Mike Thornberry, Publisher	
Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571.			

The Duncan Banner

P.O. Box 1268 • Duncan, Oklahoma 73534-1268
FAX (580) 255-8889 • (580) 255-5354 • TAX ID 73-0125393

ADVERTISING 90075500
INVOICE and STATEMENT

1 BILLING PERIOD		2 ADVERTISER/CLIENT NAME	
05/01/00 - 05/31/00		Stage Stores, Inc	
23 TOTAL AMOUNT DUE	*UNAPPLIED AMOUNT	3 TERMS OF PAYMENT	
2,741.56		Pymt due 10th of mo	
21 CURRENT NET AMOUNT DUE	22 30 DAYS	60 DAYS	OVER 90 DAYS
1,501.33	1,240.23	.00	.00

4 PAGE #	5 BILLING DATE	8 BILLED ACCOUNT NAME AND ADDRESS	9 REMITTANCE ADDRESS
1	05/31/00	KATHY Stage Stores, Inc 10201 MAIN ST HOUSTON TX 77025	
6 BILLED ACCOUNT NUMBER			
07966			
7 ADVERTISER/CLIENT NUMBER			

PLEASE DETACH AND RETURN UPPER PORTION WITH YOUR REMITTANCE

10 DATE	11 NEWSPAPER REFERENCE	12 13 14 DESCRIPTION-OTHER COMMENTS/CHARGES	15 16 SAU SIZE BILLED UNITS	17 18 TIME RUN RATE	19 GROSS AMOUNT	20 NET AMOUNT
04/30		*** REPRINTED BILL *** BALANCE FORWARD				1,240.23
05/31	90075818	Finance Charge				21.70
	PUBLICATION:	Duncan Banner				
	AD CLASS:	Local Pre-Prints				
05/17	153558	insert		1		468.83
		Ad Class Totals:	10.19T	46.00		
	AD CLASS:	Retail Advertising				
05/04	153977	Best Brands	3x10I	1		199.50
			30I	6.65		
05/11	153976	Mom's Day Super Wkd.	6x11I	1		438.90
			66I	6.65		
05/24	154808	memorial day sale	4x14I	1		372.40
			56I	6.65		
		Ad Class Totals:	\$1,010.80	152.000 inch		
		Publication Totals:	\$1,479.63			

STATEMENT OF ACCOUNT AGING OF PAST DUE AMOUNTS

21 CURRENT NET AMOUNT DUE	22 30 DAYS	60 DAYS	OVER 90 DAYS	*UNAPPLIED AMOUNT	23 TOTAL AMOUNT DUE
1,501.33	1,240.23	.00	.00		2,741.56

The Duncan Banner

1001 Elm • P.O. Box 1268 • Duncan, Oklahoma 73534-1268
FAX (580) 255-8889 • (580) 255-5354 • TAX ID 73-0125393

A 1.75% SERVICE CHARGE PER MONTH (21% ANNUALLY)
WILL BE CHARGED ON PAST DUE BALANCES AT THE END
OF EACH MONTH.
* UNAPPLIED AMOUNTS ARE INCLUDED IN TOTAL AMOUNT DUE

24		25		ADVERTISER INFORMATION	
1 BILLING PERIOD		6 BILLED ACCOUNT NUMBER		7 ADVERTISER/CLIENT NUMBER	8 ADVERTISER/CLIENT NAME
90075500 05/01/00 - 05/31/00		07966			Stage Stores, Inc

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ADVERTISING 90073698
INVOICE and STATEMENT

1 BILLING PERIOD		2 ADVERTISER/CLIENT NAME	
04/01/00 - 04/30/00		Stage Stores, Inc	
23 TOTAL AMOUNT DUE		3 TERMS OF PAYMENT	
1,240.23		Pymt due 10th of mo	
21 CURRENT NET AMOUNT DUE		22 30 DAYS	
1,240.23		.00	
		60 DAYS	
		.00	
		OVER 90 DAYS	
		.00	

4 PAGE #	5 BILLING DATE	6 BILLED ACCOUNT NAME AND ADDRESS	9 REMITTANCE ADDRESS
1	04/30/00	KATHY Stage Stores, Inc 10201 MAIN ST HOUSTON TX 77025	
6 BILLED ACCOUNT NUMBER			
07966			
7 ADVERTISER/CLIENT NUMBER			

PLEASE DETACH AND RETURN UPPER PORTION WITH YOUR REMITTANCE

10 DATE	11 NEWSPAPER REFERENCE	12 13 14 DESCRIPTION-OTHER COMMENTS/CHARGES	15 16 SAU SIZE BILLED UNITS	17 18 TIME RUN RATE	19 GROSS AMOUNT	20 NET AMOUNT
03/31		*** REPRINTED BILL ***				1,612.35
04/24	639800	BALANCE FORWARD				1,538.65
04/30		Payment On Account				73.70
		Adjustment - Correct Prepr				
	PUBLICATION:	Duncan Banner				
	AD CLASS:	Local Pre-Prints				
04/05	149555			1		468.83
			10.19T	46.00		
		Ad Class Totals:	\$468.83			
	AD CLASS:	Retail Advertising				
04/13	151532	Spring Sale	4x14I	1		372.40
			56I	6.65		
04/18	151537	Pre-Easter sale	3x10I	1		199.50
			30I	6.65		
04/25	151538	EDM Sale and Clearance	3x10I	1		199.50
			30I	6.65		
		Ad Class Totals:	\$771.40			
		Publication Totals:	\$1,240.23		116.000 inch	

STATEMENT OF ACCOUNT AGING OF PAST DUE AMOUNTS

21 CURRENT NET AMOUNT DUE	22 30 DAYS	60 DAYS	OVER 90 DAYS	*UNAPPLIED AMOUNT	23 TOTAL AMOUNT DUE
1,240.23	.00	.00	.00		1,240.23

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1 BILLING PERIOD		6 BILLED ACCOUNT NUMBER		2 ADVERTISER/CLIENT NAME	
90073698 04/01/00 - 04/30/00		07966		Stage Stores, Inc	

UNITED STATES BANKRUPTCY COURT

Southern District of Texas

Notice of Chapter 11 Bankruptcy Case, Meeting of Creditors, & Deadlines

A chapter 11 bankruptcy case concerning each of the debtor corporations listed below was filed on June 1, 2000

You may be a creditor of one or more of the debtor(s). **This notice lists important deadlines.** You may want to consult an attorney to protect your rights. All documents filed in the cases may be inspected at the bankruptcy clerk's office at the address listed below.

NOTE: The staff of the bankruptcy clerk's office cannot give legal advice.

See Reverse Side For Important Explanations.

Debtor (name(s), case numbers and address):

Stage Stores, Inc., a Delaware corp.; Case No. 00-35078-H2-11
Specialty Retailers, Inc., a Texas corp.; Case No. 00-35079-H2-11
Specialty Retailers, Inc. (NV), a Dallas corp.; Case No. 00-35080-H2-11
10210 Main Street
Houston, TX 77025-5229
Toll Free Number: 1-800-804-2013 (for case information)

Jointly Administered Under
Case Number 00-35078-H2-11

Taxpayer ID Nos:

76-0407711 (Stage Stores, Inc.)
74-0821900 (Specialty Retailers, Inc.)
91-1826900 (Specialty Retailers, Inc. (NV))

Attorney for Debtors (name and address):

Andrew E. Jillson, Esq.
Lynnette R. Warman, Esq.
Jenkins & Gilchrist, a Professional corporation
1445 Ross Avenue, Suite 3200
Dallas, TX 75202-2799

Attorneys for Debtors Telephone Number:

Toll Free 1-877-559-9672

Information may also be obtained from the following website:

Website address: www.stagestoresbankruptcy.com

Meeting of Creditors

Date: 7 / 11 / 00 Time: 2:00 () A.M.
(X) P.M.

Location: U.S. Courthouse
Jury Assembly Room
515 Rusk, 6th Floor
Houston, Texas 77002

Deadlines to File a Proof of Claim

Proofs of Claim must be *received* by the bankruptcy clerk's office by the following deadline:

For all creditors (except a governmental unit): 10/9/00

For a governmental unit: 11/28/00

**Mail claim to: U.S. Bankruptcy Court
P.O. Box 61288
Houston, TX 77208**

Creditors May Not Take Certain Actions:

The filing of the bankruptcy case automatically stays certain collection and other actions against the debtor and the debtor's property. If you attempt to collect a debt or take other action in violation of the Bankruptcy Code, you may be penalized.

Address of the Bankruptcy Clerk's Office:

515 Rusk Avenue
1st Floor
Houston, Texas 77002
Telephone number: 713/250-5115

For the Court:

Clerk of the Bankruptcy Court:

Michael N. Milby, Clerk

Hours Open: 9:00 a.m. - 4:30 p.m.

Date: